SURMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFILD EOGNEY, MYSCONSIA

Date Staling (Received)

11 N 1 5 2016

1 5 2016

Refund: Date: Amount Paid: Permit #: 2.83.19 2.32 7.72 6.28-16 16-0175

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Bayfield Co. Zoning Dept.

☐ is Property/Land within 300 feet of River, Stream (ind. Intermittent)  Creek or Landward side of Floodplain? If yes—continue —▶	Section 18, Township 44 N, Range 7 W	1/4,1/4 Gov't Lot Lot(s)	PROJECT  Legal Description: (Use Tax Statement)		Authorized Agent: (Person Signing Application on behalf of Owner(s))	Contractor:	Address of Property: 1745 Builder bay Rd 5	owner's Name: Randy or Collegen Gunlerson	TYPE OF PERMIT REQUESTED → ✓ LAND USE ☐ SAN
er, Stream (ind. Intermittent) If yescontinue	-W BAYNES	CSM Vol & Page	04-004-2-44-		Agent Phone:	Contractor Phone:	City/State/Zip: BAY DLS	Mailing Address:	SANITARY   PRIVY
Distance Structure is from Shoreline:	LS	Lot(s) No. Block(s) No.	PIN: (23 digits) 04-064-2-44-09-18-1-00-67-5000		Agent Mailing Address (include City/State/Zip):	Plumber:	W/State/Zip: BAYNes W1 54873	Walling Address: City/State/Zip: CY88D	☐ CONDITIONAL USE ☐ SPECIAL USE
<b>—</b>	Lot Size	Subdivision:	Recorded Docume		State/Zip):			54880	988 888
Is Property in Are Wetlands Floodplain Zone? Present?	Acreage 1.8 AUCS		Oocument: (i.e. Property Ownership)	Attached □ Yes □ No	Written Authorization	Plumber Phone:	206-3413	Telephone: 7-18 206-4110	□ B.O.A. □ OTHER

Proposed Construction:	Existing Structure			*		10,000	ı		Value at Time of Completion *include donated time & material	Non-Shoreland		№ Shoreland —	۲ !
ction:	Existing Structure: (If permit being applied for is relevant to it)		Property	Run a Business on	☐ Relocate (existing bldg)	☐ Conversion	☐ Addition/Alteration	New Construction	Project			S Is Property/Land within 1000 feet of Lake Pond or Flowage	Creek or Landward side of Floodplain?
	r is relevant to it)	POTHS K	☐ Foundation	□ No Basement	□ Basement	☐ 2-Story	☐ 1-Story + Loft	☐ 1-Story	# of Stories and/or basement			n 1000 feet of lake Pon	
Length: 24 text	Length:						☐ Year Round	∆ Seasonal	Üse		If yescontinue	nd or Flowage	If yescontinue
+	•			X None		□ 3	□ 2	<b>-</b>	# of bedrooms		approximate	Distance Stra	
Width: 12 fact	Width:	₩ None	□ Compost Toilet	☐ Portable (w/service contract)	<sup>*</sup> □ Privy (Pit) or Vaulted (min 200 gallon)	X Sanitary (Exists) Specify Type: SI SHAUG	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?		nste 400 feet	Distance Structure is from Shoreline .	Teet
Height: 10 fect	Height:			ntract)	ulted (min 200 gallon)	Tify Type: ST SHARM)	ify Type:		pe of ry System operty?		X.No	□Yes	Floodplain Zone?
tec+				<u></u>	2000	) i	∖ ∃ Well	☐ City	Water		¥No	□Yes	Present?

Floodplain Zone?

The second continues and manufactures and the second as the second and the second		The state of the s			
Proposed Use		Proposed Structure	uia	Dimensions	Square Footage
	Principal Structur	Principal Structure (first structure on property)	^	×	
	Residence (i.e. ca	Residence (i.e. cabin, hunting shack, etc.)	^	× )	
	with Loft	oft	)	x )	
Residential Use	with:	with a Porch	_	×	
	with	with (2 <sup>nd</sup> ) Porch	_	×	
	with	with a Deck	)	x )	
	with	with (2 <sup>nd</sup> ) Deck	)	x )	
Commercial Use	with,	with Attached Garage	_	× _	
	☐ Bunkhouse w/ (□	<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	(	х )	
	☐ Mobile Home (manufactured date)	nufactured date)	}	× )	
	☐ Addition/Alteration (specify)	on (specify)	1	х )	
□ Wiunicipai ∪se	Accessory Building	s (specify)		× }	
Hec'd for Issuance		Accessory Building Addition/Alteration (specify)		х )	
				-	
	☐ Special Use: (explain)	in)	(	X }	
7	☐    Conditional Use: (explain)	explain)	_	× )	
OBCIGICA	Other: (explain)   らんしい	Shed	こしな	1 45 x	386

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be refied upon by **Bayfield County** in determining whether to issue a permit. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described roperty at any reasonable tige for the purpose of inspection. Owner(s): 💆 Owner(s): (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of Authorization must accompany this application) Autolion Date Ö 6

Authorized Agent: (If you

Address to send permit

6202

wner(s) a

nalf of the owner(s

letter of authorization must accompany this application)

Ove Supwik W S

Date

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Hold For Sanitary:	Iditions Attach	ord:	Was Parcel Legally Created	-	Permit #: 16-0175  Is Parcel a Sub-Standard Lot   Yes (Deed of Record)   Yes Parcel in Common Ownership   Yes (Fused/Contiguous Lot(s))   S Structure Non-Conforming   Yes   Yes		(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).  NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code.  The local Town, Village, City, State or Federal agencies may also require permits.  Issuance Information (County Use Only)  Sanitary Number: # of bedrooms: Sanitary Date:	Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be wisible other previously surveyed corner or marked by a licensed surveyor at the owner's expense.  Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback one previously surveyed corner to the other previously surveyed corn	Setback to Septic Tank or Holding Tank Setback to Drain Field Setback to Privy (Portable, Composting)			latted Road ght-of-Way	Description	Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point)	(1) Show location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):  Plate (1) - (7) Show (priority)	ow: <u>Draw or Sketch your Pi</u>
Hold For Affidavit:	-(If No they need to	The second	Were Prope	Previously Granted by	Permit Date: 6-28-16  ZNo Mitigation Required Mitigation Attached	niai:	s) of New Construction, Septic Tank (Size) Expire One (1) Year from the Date of Issumo Family Dwelling: ALL Municipalities Avn, Village, City, State or Federal agencies Sanitary Number:	minimum required setback, the boundary line from w 's expense.  *Less than thirty (30) feet from the minimum require tless than thirty (30) feet from the minimum require table by the Department by use of a corrected comp	Feet Feet	Feet Elevation o	Feet	Feet Feet	Measurement	point)	Proposed Construction Worth (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DE); (*) Holding Tank (HT) and/or (*) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%  April Land Classes over 20%  April Land Cl	ardless of what you are applying tor)
Hold For Face:	be attached.)  m. F. Far  M. Slovestor	Zonir Lakea Date	Were Property Lines Represented by Owner Was Property Surveyed Pres	Variance (B.O.A.) Case #	□Yes ZNo		Drain field (DF), Holding Tank (HT), brain field (DF), Holding Tank (HT), ance if Construction or Use has not begive Required To Enforce The Uniform Dw may also require permits.  # of bedrooms: Sanit			Elevation of Floodplain	m Wetland	Setback from the Lake (ordinary high-water mark Setback from the River, Stream, Creek Setback from the Bank or Bluff	Description	Changes in plans must be approved	oiding Tank (HT) and/or (*	
D 7-10		Zoning District (PRB Lakes Classification ( ) Date of Re-Inspection:	es No	The state of the s	Affidavit Required □ Yes Z∕No Affidavit Attached □ Yes Z∕No		HT), Privy (P), and Well (W). t begun. n Dwelling Code. Sanitary Date:	from one previously surveyed corner to the k must be measured must be visible from posed site of the structure, or must be	/IIII Feet		ard.	k) 4bb Feet かかっと Feet ハカコと Feet	Measurement	by the Planning & Zoning Dept.	Privy (P)	

## CONDOMINIUM PLAT FIRST ADDENDUM TO BOULDER RETREAT LOCATED IN GOVERNMENT LOT 1, SECTION 18, T. 44 N., R. 9 W., IN THE TOWN OF BARNES, BAYFIELD COUNTY, WISCONSIN SEC. 7 1/4 CORNER 1077.24 EXISTING DRIVEWAY 1-1/2 ANGLE IRON TOTAL PARCEL MIDDLE 487,900 SQ.FT.± EAU CLAIRE 11.20 ACRES± LAKE NOTE N 87'37'43" w SEE SHEET 2 OF 6 FOR CURVE TABLE ENLARGEMENT OF UNITS 2-4 CURVE ARC LENGTH CENTRAL ANGLE | RADIUS | CHORD LENGTH CHORD BEARING 11.74 96'22'23" 6.98 N 88'14'22" E 10.40 SYMBOL KEY 32.B4 CZ 84 10 57 22.35 N 02'02'18" W 29,97 C3 SCALE: ONE INCH = 100 FEET 60.59 43'29'05" 79.84 N 65'52'19" W 59.15 # TELEPHONE PEDESTAL # YARD LIGHT C4 29.50 23'09'33" 72.98 \$ 55'09'13" E 29.30 C5 93.25 73\*12\*50" 72.98 87.04 N 75'39'36" E LEGEND NELSON 101 W. WAIN STREET CLIENT: BEAUTO, M. SCALE: ONE INCH = 100 FEET DRAFTED BY: T. OKSKUTA & MONUMENT FOUND, AS NOTED PLE: N/T44R9H/SECTB SURVEYING ASHLAND, HISCONSIN 54806 (715) 682-2892 FAX: (715) 682-5100 JOB NO.: N10/125 PSDATA/N10125 ACAD/N10125 FIRST AUGENOUN MAY 2013/2013 FIRST ADDENDUM SHEETS 1-5 MAY 8 INCORPORATED MAY 8, 2013 O 1-1/4" X 18" IRON PIPE SET THIS SURVEY NH. 365 PG. 81 SHEET 1 OF 6 SHEETS SURVEYING NORTHERN WISCONSIN SINCE 1964

MAP NO. 3988-ADDENDING 1

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAYFIELD COUNTY, WISCONSIN

Date Safe (Received)

JUN 2 1 2016 

Baylield Co. Zoning Dept.

		No. of Concession,	
Refund:	Amount Paid:	Date:	Permit #:
	\$75 6-30-16	6-30-16	16-0180

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

CJ

	Municipal Use				Commercial Use				Y Residential Use				Proposed Use	Proposed Construction:	Existing Structure: (If permit being applied for is relevant to it)		· G			2 0000 EC		r	Value at Time of Completion * include donated time & material	Non-Shoreland	☐ Shoreland → □	<b>3</b>	Section 18	1/4,	PROJECT LOCATION Les	Authorized Agent: (Person Signing Application on behalf of Owner(s))  (Man 1m, B	Contractor:	Address of Property:	Owner's Name:	O NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.  TYPE OF PERMIT REQUESTED—>    LAND USE SANITARY
,													<b>\</b>	7.	permit bein	Married Marrie	Property	Run a Business on	Relocate (existing bldg)	☐ Conversion	YAddition/Alteration	□ New Construction	Project		ls Property/	Is Property/ eek or Land	, Township	1/4	Legal Description:	Signing Applica		Valla	Tran	N UNTIL ALL I
Accessory	Accessory Building	Addition/	Mobile Ho	Bunkhous							Residence	Principal S			g applied for			less on	isting bldg)		teration	ruction	Ŧ		Land within	Land within ward side o	15 N	Gov't Lot	4	ation on behalf	`	Ž,	Z	PERMITS HAVE BEEN
Building Additio		Addition/Alteration (specify)	Wobile Home (manufactured date)	e w/ (□ sanitary, g	with Attached Garage	with (2 <sup>nd</sup> ) Deck	with a Deck	with (2 <sup>nd</sup> ) Porch	with a Porch	with Loft	Residence (i.e. cabin, hunting shack, etc.)	structure (first st			is relevant to it)	The state of the s	Foundation	No Basement	Basement	☐ 2-Story	☐ 1-Story + Loft	¥ 1-Story	# of Stories and/or basement		Lake,	☐ Is Property/Land within 300 feet of River, Creek or Landward side of Floodplain?	N, Range 9 W	Lot Lot(s)	tatement)	<u></u>	 	ι 1		E BEEN ISSUED TO APPLICA  USE SANITARY
Accessory Building Addition/Alteration (specify)	ý)	ĺγ)	l date)	Bunkhouse w/ (□ sanitary, or □ sleeping quarters, or	Garage			1			ng shack, etc.)	Principal Structure (first structure on property)	Proposed Structure	Length:							t   🏻 🎖 Year Round	☐ Seasonal	ıt Üse		Pond or Flowage If yescontinue —	Is Property/Land within 300 feet of River, Stream (ind. Intermittent) reek or Landward side of Floodplain? If yescontinue	Town of: Barnes	CSM Vol & Page		Agent Phone: 7/5=2-//0-5556	Contractor Phone:	City/State/Zip: Barnes	Mailing Address: 6634 [/eur water Crop	PRIVY
(v) lean to			***************************************								4	)	ure	P				None	 	3	□ 2		# of bedrooms		Distance Structure	Distance Structure	8	Lot(s) No.	09-	Agent Mailing Add	Plumber:	NI S.	city/st	☐ CONDITIONAL USE
		A CONTRACTOR OF THE CONTRACTOR	The standard of the standard o	□ cooking & food prep facilities)			The state of the s			***************************************				Width: \$0		None	Compost Toilet	Portable (w/service contract)	☐ Privy (Pit) or	■ Sanitary (Exists) Specify Type:	□ (New) Sanitary	☐ Municipal/City	V Sewer Is or		ture is from Shoreline :	ture is from Shoreline :		Block(s) No.	8	Agent Mailing Address (include City/State/Zip): と		54873	ate/Zip: Lu K e.	USE SPECIAL USE
1 / 2	(	_		_	_	-	_	_		_	_		Dim				et	ervice contra	Vau	<b>ts)</b> Specify	Y Specify Type:		What Type of Sewer/Sanitary System Is on the property?		Ä	<del>       </del>	Lot Size	Subdivision:	Volume	Sathes htt			0	
(0/2 X	× )	×	×	× )	×	×	×	× 	× )	×	×	×	mensions	Height:	Height:			act)	lted (min 200 gallon)	Туре:	Type:		of ystem erty?		☐ Yes	Is Property in	Acreage	Add to f	Page(s)	Written A Attached	Plumber Phone:	6-7/-8		□ B.O.A. □
980										and the second s			Square Footage	<b>%</b> 2				To the state of th	on)		_ ¤well	□ City	Water			Are Wetlands		Phu. ben	Yolume Page(s)	Written Authorization Attached □ Yes □ No	r Phone:	65/-875-603	ne:	□ OTHER

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

[(we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) further accept liability which may be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. Secretarial Staff Rec'd for Issuance

Accessory Building Addition/Alteration (specify)

 $\times |\times| \times$ 

. >

Special Use: (explain) \_\_\_\_\_\_
Conditional Use: (explain) \_\_\_\_

Other: (explain)

	Authorized Agent: _	(If there are Multiple	Owner(s):
(If you are signing	alin	Owners listed on t	
on behalf of	R	he Deed All (	
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)	Authorized Agent: Ulm M B	(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)	THE PROPERTY OF THE PROPERTY O

Address to send permit

Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Date

1-11-16

Date

Show Location of: Show / Indicate:	Proposed Construction Proposed Construction North (N) on Plot Plan	of what you are applying for) tion lan		
	(*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) H (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	(*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	k (HT) and/or (*) <b>Privy</b> (P)	<i>)</i>
ι Λ		He Can		
		4		100
Please complete (1) (7) above (prior to continuing)  (8) Setbacks: (measured to the closest point)	point) /	$S = O(27)^{O(l)} Perm.^{2}$ Changes in plans must be approved	nust be approved by the Planning & Zoning Dept.	& Zoning Dept
Description  Setback from the Centerline of Platted Road	Measurement  プルク Feet	Description Setback from the Lake (ordinary	high-water mark)	Measurement Feet
Setback from the Established Right-of-Way		Setback from the River, Stream, Setback from the Bank or Bluff	Creek	Feet
Setback from the <b>South</b> Lot Line Setback from the <b>West</b> Lot Line Setback from the <b>East</b> Lot Line	170 Feet	Setback from Wetland  20% Slope Area on property  Elevation of Floodplain	□Yes	Feet No
Setback to Septic Tank or Holding Tank Setback to Drain Field Setback to Drain Field	70 Feet	Setback to Well	60	Feet
Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visite other previously surveyed corner or marked by a licensed surveyor at the owner's expense.  Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the privated by a licensed surveyor at the owner's expense.	Of feet of the minimum required setback, or at the owner's expense.  If the owner's expense.  If (10) feet but less than thirty (30) feet for corner, or verifiable by the Department by	the boundary line from which the setback must be meaning the boundary line from which the setback must be meaning the manner with the minimum required setback, the boundary line for the minimum required setback, the boundary line for minimum required tompass from a known corner with use of a corrected compass from a known corner with	le fram ane previou	isly surveyed corner to the ed must be visible from tructure, or must be
(9) Stake or Mark Proposed L NOTICE: All Land Us For The Construction Of New The	Stake or Mark Proposed Location(s) of New Construction, Septic  NOTICE: All Land Use Permits Expire One (1) Year from the Da For The Construction Of New One & Two Family Dwelling: ALL Municip The local Town, Village, City, State or Federal	itake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DE), Holding Tank (HT), Privy (P), and Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code  The local Town, Village, City, State or Federal agencies may also require permits.	olding Tank (HT), Privy (P), and Well (W).  r Use has not begun.  r The Uniform Dwelling Code.  mits.	<u>vell</u> (w).
Issuance Information (County Use Only) Permit Denied (Date):	Sanitary Number: Reason for Denial:	# of bedrooms:	Sanitary Date:	
Permit #: 1/6-6/86	Permit Date: 6	276		
Lot	(Deed of Record) No (Fused/Contiguous Lot(s)) No No	ion Required □ Yes Non Attached □ Yes Non Attached □ Yes Non	No Affidavit Required  No Affidavit Attached	□ Yes \ \ \ No □ Yes \ \ \ No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)	A.) Case #:	The state of the s
Was Parcel Legally Created Wes	No No	Were Property Lines Represented by Owner Was Property Surveyed	by Owner ☐ Yes Surveyed ☐ Yes	ON N
Inspection Record: No HZO WNIL P	Pollows		Zoning District Lakes Classification (	P
	Inspected by:	Control	Date of Re-Inspection:	n:
No 130 UNILL Pressure	Attached?    Yes   1/90-	(If <u>No</u> they need to be attached.)		
Signature of inspector:			Date of Approval:	2/1610
Hold For Sanitary: Hold For TBA:	☐ Hold For Affidavit:	idavit: Hold For Fees:		***************************************

Puleszed Mo side walk Ran Driveway peck House Oak € Valley Drive

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zonling Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION F



Bayfield Co.

\$7.00

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

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	×		VALUE AND THE PARTY OF THE PART	-		Conditional Use: (explain)	Conditiona		
	X					e: (explain)	Special Use: (explain)		
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			- And a state of the state of t	Westernisher or second	accidation (specify)	January Committee Committe	Theorem y	L	-
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108	( <i>な)</i> ×	5		to Deck	Add on t	Addition/Alteration (specify)	Addition/	<b>-</b>	•
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	X )	•	sleeping quarters, or $\square$ cooking & food prep facilities)	ooking &	sleeping quarters, c	Bunkhouse w/ (☐ sanitary, or [	Bunkhouse		
	) ×		***************************************		age.	with Attached Garage		Use	Commercial Use
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	;   ×				snack, etc.)	Residence (i.e. capin, nunting snack, etc.)	Kesidence		
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Footage									
Square	imensions	Dime		ט	Proposed Structure			<b>\</b>	Proposed Use
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						□ Foundation		Property	
	ct)	ice contra	☐ Portable (w/service contract)	□ None			iness on	☐ Run a Business on	
on)	Vaulted (min 200 gallon)	Vaulte	Privy (Pit) or			☐ Basement	existing bldg)	Relocate (existing bldg)	
	ype: Como	1		 ω			ח	☐ Conversion	(00)
   ₩ell	lı -	Specify Type:	□ (New) Sanitary	□ 2	Year Round	☐ 1-Story + Loft	Alteration	Addition/Alteration	Т
City				щ	Seasonal	☐ 1-Story	truction	New Construction	***
?			265		100			2	material
Water	ystem rty?	wer/Sanitary Syste Is on the property?	Sewer/Sanitary System Is on the property?	of bedrooms	Use	# of stories and/or basement	et.	Project	* include donated time &
	Ť	What Type of	чМ	#		#			Value at Time of Completion
					A COLUMN TO THE PARTY OF THE PA				✓ Non-Shoreland
		a d t			If yescontinue	****			
□ Ves	□ Yes		Distance Structure is from Shoreline:	Distance Stru		Lake,	y/Land within	□ Is Propert	□ Juliaidile —
Are Wetlands Present?	Is Property in Floodplain Zone?	14	is from Shorelin	Distance Structure	tream (incl. Intermittent)	liver, S	Creek or Landward side of Floodplain?	Creek or La	- chaldens
				,   K				1000	
ć					Barves	N, Range / W	42	👸 , Township	Section /
	Acre	Lot Size	Lot			ס	Ī	- 1	Sarco
of all and a second		A MAINI	proceda) Mo.	EOrls) No.	30/23	Edital Colum	99120	1/4	1/4,
(0)	1 080(2)		7/ /7 6%	19 7 - B		<u>.</u>			
Document: (i.e. Property Ownership)  Page(s)	ument: (i.e. Pro	Kecorded Doc	) }	<i>*/</i> - ^ ^	. 5	(Use Tax Statement) 04-		Legal Description:	PROJECT
□ No	□ Yes		***************************************				***************************************		
Written Authorization Attached	Attached	/zip):	Agent Mailing Address (include Lity/State/zip):	gent Ivialling Ad	Agent Pnone:		lication on behalf	erson signing App	Authorized Agent: [Person Signing Application on behalf of Owner(s)]
		[				-			
Phone:	Plumber Phone:		-	mber:	one:	Cont		7	Contractor:
i.	000		56495	N	City/State/Zip:	City			Address of Property:
								Trans	JONO
ne:	lelephone;		city/state/zip:	Cusy	Ividining Address:	I H		•	Cwite s Name:
□ OTHER	B.O.A.		☐ CONDITIONAL USE ☐ SPECIAL USE	CONDITIONA		SAN	► □ LAND USE	QUESTED-	TYPE OF PERMIT REQUESTED

Owner(s): FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. (If there are Multiple Owners All Owners must sign or letter(s) of authorization must accompany this application) Date

Authorized Agent: listed on the I

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send

Date

02

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D/

		Hold For Fees:		Hold For Affidavit:	Hole	Hold For TBA:	Hold F	old For Sanitary:
Date of Approval:	Dat					1	20	ignature of Inspector:
				l salak	F	7		H 47 Zeeks
Zoning District ( ) Lakes Classification ( ) Date of Re-Inspection:	Zoning Lakes C	ned )	Most be attached )	8	pected by	onditions Att	Ins	Date of Inspection: Condition(s):Town,
	. N	s Represented by Owner Was Property Surveyed	Were Property Lines		40	YYes □ No	Was Parcel Legally Created Was Proposed Building Site Delineated Ispection Record:	Was Proposed Bunspection Record:
	Case #:	Variance (B.O.A.)	Previouslý Granted by ☐ Yes ☐ No				ce (B.O.A.) Case #:	Granted by Variance (B.O.A.)  ☐ Yes ☐ No
Affidavit Required ☐ Yes S No Affidavit Attached ☐ Yes S No	Affidavit Affidavit	□ Yes S No	Mitigation Required Mitigation Attached	NO ON NO	ord) iguous Lot(s))	s (Deed of Record)s s (Fused/Contiguous	Is Parcel a Sub-Standard Lot	Is Parcel a Su Is Parcel in Comr Is Structure N
			0-16	6				Permit #: /6
Sanitary Date:	Sanita	# of bedrooms:		nber: enial:	Sanitary Number: Reason for Denial:	e Only)	Issuance Information (County Use Only) Permit Denied (Date):	Issuance Informa Permit Denied (Date):
1. ling Code.	is not begur iform Dwell	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code  The local Town, Village, City, State or Federal agencies may also require permits.	rom the Date of Issuance if Construction or Us LL Municipalities Are Required To Enforce The or Federal agencies may also require permits.	) Year from elling: ALL N	mits Expire One ( & Two Family Dw Town, Village, Cit	Land Use Pen Of New One The local	NOTICE: All For The Construction	
privy (P), and Well (W).	of the propose,	Septic Tank (ST), Drain field (DF), Holding Tank (HT)	Septic Tank (ST), Drai	nstruction,	ion(s) of New Co	osed Locati	reported the owner's expense.  Stake or Mark Proposed Location(s) of New Construction.	narked by a licensed su
m one previously surveyed corner to the ust be measured must be visible from	ist be visible from the setback mus	which the setback must be measured must be deasured must be setback, the boundary line from which	boundary line from which the he minimum required setback	(30) feet from the	owner's expense.	ed surveyor at the ore than ten (10)	other previously surveyed corner or marked by a licensed surveyor at the owner's expense.  Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback one previously surveyed corner to the other receivable surveyor at the construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback	other previously survey Prior to the placement one previously surveye
1997		1 1 1	October 10 and 1		of the minimum requir	g)	Setback to Drain Field  February (Portable, Composting)  February to the placement or construction of a structure within ten (10) feet of the minimum regulard outs.	Setback to <b>Drain Field</b> Setback to <b>Privy</b> (Porta
7000		1	Sethack to Well	Feet	4		c Tank or Holding Tank	Setback to <b>Sept</b>
Feet No		tland on property	Setback from Wetland  20% Slope Area on property Flevation of Floodplain	Feet	را الراج		Setback from the <b>South</b> Lot Line Setback from the <b>West</b> Lot Line Setback from the <b>East</b> Lot Line	Setback from the South Lot Lir Setback from the West Lot Lin Setback from the East Lot Line
Feet		Setback from the Bank or Bluff	Setback from the	Feet rect	(60)	way	e North Lot Line	Setback from th
	/ater mark)	Lake (ordinary high-w	Setback from the	Feet	60	d Road	e Centerline of Platted Road	Setback from the C
Measurement		Description		nent	Measurement		Description	
by the Planning & Zoning Dept.	approved b	Changes in plans must be	C.		nuing) sest point)	orior to contir	<ul><li>complete (1) ~ (7) above (prior to continuing)</li><li>(8) Setbacks: (measured to the closest point)</li></ul>	(8)
		THE PROPERTY OF THE PROPERTY O				T T T T T T T T T T T T T T T T T T T	Total Control	
								***************************************
			To delicate the second					
(*) Privy (P)	and/or (*)	(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	(*) Drain Field (DF); ek; or (*) Pond :0%	c Tank (ST); Stream/Cre opes over 2	ell (W); (*) Septi ke; (*) River; (*) etlands; or (*) Sl	(*) W (*) La (*) *		(5)
		oad)	<b>ad</b> (Name Frontage R	ri rontage Ro	North (N) on Plot Plan  (*) Driveway and (*) Fro  All Existing Structures of			(2) (3) (4)
			of what you are applying for)	what you ar	Property (regardless of	your Proper	Show Location of	

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